



**ATR-I**  
SUBSTANCE ABUSE  
TREATMENT AVAILABLE  
*"There is MORE opportunity, MORE choice  
and MORE access to get help for substance abusers  
\*Opportunity- More providers and more services  
\*Choice- Clients choose their Treatment provider for  
increased success  
\*Access- More people served in more communities"*

## **Welcome again to the latest edition of Frequently Asked ATR Questions**

In keeping with BPA's commitment to keeping the provider community informed about recently occurring and recurring concerns, we have developed this forum to address these issues. Frequently Asked Questions (FAQ's) are arranged below in topical areas.

**Q: I am not a BPA network provider and I need to verify client specific information with BPA immediately. If I fax in a release to BPA, will I then be able to speak with someone in Care Management?**

A: Before BPA can speak with a third party about any aspect of a client's care, we need a signed BPA Authorization to Use or Disclose PHI that has been approved by our HIPPA Compliance Officer. The typical turnaround time on this is two working days. This form is located on our website ([www.bpahealth.com](http://www.bpahealth.com)) in the "Employee and Family Forms" section. A best practice to reduce or eliminate this occurrence is to obtain a signed BPA Authorization to Use or Disclose PHI at the first possible opportunity, and fax this in to BPA at 1-208-344-7430.

**Q: Is there a separate procedure for getting a client into Detox? Does the client still need to call into BPA's 1-800 number for a screening?**

A: The client will need to call in for a screening, unless it is after business hours or on the weekend. If it is an emergency the client can call the Detox facility to determine if there is an open bed and if the facility will admit them without pre-authorization. If the client is incapacitated, the Detox facility can make the initial screening call, and if necessary the screening information can be completed later in the Detox stay.

**Q: I have noticed that there are new people in Care Management when I call. Who are these people, and what do they do?**

A: Care Management has been experiencing an extremely high volume of business since the implementation of ATR. BPA has brought in some temporary staff to assist while we hire and train new permanent employees. One position many of you will come into contact with is our Risk Factor Review Coordinator.

You will be contacted by this person during your regularly scheduled Risk Factor Reviews, however you may hear from her sooner we streamline and becoming more proactive in this process. If you have any concerns with BPA's Care Management staff please ask to speak with Denise Leavitt, our Director of Care Management.

**Q: How do I let BPA know that my facility can handle more clients?**

A: You can update your capacity information in two ways. Either call BPA (1-800-922-3406) and ask to speak to Irene Pearson, she is responsible for managing facility capacity and the waiting lists. Or fill out a Provider Profile, which is available by calling Ed Jensen at the same number.

**Q: We have seen a chronic need for expanded state funded Detox and Residential services. Can ATR address these needs?**

A: This well documented need is a complicated issue. The two biggest factors of this are network capacity (how many beds are there for residential care) and fiscal capacity (how many beds can the system afford). Expansion for these Levels Of Care is further constrained by competing funding sources (private insurance or an individual may pay at a higher rate than state funding) and the high cost to set up a new facility for Detox or Residential Care. Another point to consider is that a Residential admittance is usually associated with additional Levels of Care (and additional costs) as the client "steps down" in treatment need. ATR will provide additional funding dedicated to these levels of care by region. This opportunity will allow existing providers (and perhaps new providers) to expand their capacity for these services. Another option being considered is using Residential services in neighboring states. This option will add capacity and perhaps conserve funds (some states reimburse at a lower rate than Idaho).

**Q: The end of the state fiscal year is approaching (June 30, 2005). How soon after that do I need to get my billings in to BPA? I want to make sure we are paid for all of the services we delivered last year.**

A: Network providers have sixty (60) days from the date of service to submit their billings. This contract stipulation is in place without regard to the state fiscal year.

#### **ATR so far...**

Through the end of **June 19, 2005**, BPA has issued the following vouchers:

Number of Vouchers issued by Level of Care

879	Assessment
992	Outpatient
347	Intensive Outpatient
6	Adult Halfway House
13	Transitional Housing
93	Adult Detox
407	Residential
2737	Grand Count